PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

107355-00/04

CLAIMS AS FILED - PART I (Column 1) (Column								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			6		·		RA	RATE FEE		7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	 	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			6 minus 20=		. 0		XS	9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		. 6		X4:	3=	}	OR	X86=	
Мι	JLTIPLE DEPE	NDENT CLAIM P	RESENT				+14	5=		OR	+290=	
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	"0" in column 2		AL		OR	TOTAL	770
	C	CLAIMS AS A (Column 1)	MENDED	O - PAR		(Column 3)	SMA	LL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	`X\$ 9	9=		OR	X\$18=	
AME	Independent	*	Minus ***		CI AIRA	=	X43	=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
							TO ADDIT.	TAL	<u> </u>		TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		<u>.</u>	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***	01.4114	=	X43	=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		+145	=		OR	+290=	_
										OR ,	TOTAL ADDIT. FEE	
		(Column 1)	// 	(Colum		(Column 3)	ADDIT. F		. *			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	,	HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent		Minus	***		-	X43=			OR	X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR	+290=	
* If thntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE										OP. L	TOTAL	
***	the "Highest Nui	mber Previously Paid ber Previously Paid	id For IN THIS	SPACE is	less than	3, enter "3."	ADDIT. F	. —		• •	DDIT. FEE L IMN 1.	